



State of Rhode Island
Rhode Island Division of Motor Vehicles
Rhode Island Dealer's License and Regulations Office
600 New London Avenue, Cranston, RI 02920
Tel. # 401-462-5746 / Fax # 401-462-5789

2021

RHODE ISLAND DEALERS' LICENSE UPDATE INSTRUCTIONS FOR 2021

Due to a recent amendment of Rhode Island General Law § 31-5-7, "Duration of License" the Dealer's License you were issued in January, 2018 is valid for a period of three (3) years and is valid through December 31st, 2020. Dealer plates still expire on December 31st of each year, and therefore need to be renewed annually. Although the Dealer's License is valid for a three-year period there are several requirements that need to be met each year to maintain your Dealers' License in good standing, and to receive the required authorization to renew your Dealer plates. These requirements are as follows;

Completed Application for Renewal of Motor Vehicle Dealers' License to include the following:

- 1. Complete and notarize customer profile on page1 and must match what we have on record.
- 2. An updated Employee List which has been notarized. (enclosed)
- 3. An updated Employee Authorization form which has been notarized. (enclosed)
- 4. An updated Dealer Runner Authorization form which has been notarized. (enclosed)
- 5. MVT-10 Authorization form which has been notarized. (enclosed)
- 6. A line of Credit Affidavit signed by a bank official and notarized. (enclosed)
- 7. \$50,000 Surety Bond and Power of Attorney Authorization, notarized (sample enclosed)
- 8. An updated Permit to Make Sales at Retail that includes d/b/a name and address as licensed from the RI Division of Taxation that expires no earlier than June 30, 2020 for each dealership location.
- 9. Certificate of Letter of Good Standing issued by the Secretary of State (if you are a corporation) You can contact the Secretary of State by calling (401) 222-3040 or accessing their website www.state.ri.us.
- 10. An active 'Second Hand' license or equivalent, if required by your local city or town.
- 11. A company check in the amount of \$302.50 payable to the "RI Dealers' License and Regulations Office" for each location.

Please send application in same order as listed above.

You must submit the required documentation either by mail or at the Dealers' License and Regulations Office drop box, 600 New London Avenue, Cranston, RI 02920 no later than Tuesday, **December 1, 2020**. This will allow this office enough time to process the required documentation prior to December 31, 2020. Due to the large volume, individuals dropping off their documents in-person will not be allowed to wait for the forms to be reviewed. Please ensure that all the documents are completed in their entirety, and are signed by the appropriate corporate officer, sole owner or partner. When completing the required forms, please do not cross out or use correction fluid to correct errors. **All signatures must be properly notarized prior to submission.**

No changes will be accepted, example (name, officers or locations). Changes may be made after the 2021 renewal has been approved.

Please note that incomplete or illegible forms cannot be processed and will be returned. The intentional submission of any false or fraudulent information will lead to the appropriate sanctions up to and including the potential suspension or revocation of your Dealers' License and possible criminal prosecution. No exceptions.

You are reminded that you may obtain a copy of the Rules and Regulations regarding Dealers, Manufacturers and Rental Licenses by visiting the Secretary of State's website at www.sos.ri.gov, and that you, as the licensee, are responsible for ensuring that all aspects of your dealership operations are conducted in accordance with these regulations.

SPECIAL ATTENTION: COVID 19 NEW PROCEDURE

The plate renewal process will be slightly different this year. After having your application approved, we will mail you the dealer registration renewal form. After reviewing the form, you will drop the completed form and a blank check at the main entrance to the Cranston DMV in our Dealer Licensing and Regulations Office drop box located at the main entrance between the hours of 9:00am and 3:00 pm. (Do not forget to complete TR1 forms for any 900 series plates currently assigned to you.).

The registration renewals will be processed in Dealer Registration and delivered back to our office. At this point in time, we will contact you directly to set up a time and date for the exchange of plates. **We will only accept full sets of plates that are free and clear of any materials and they must be in sequential order.**

If you have any questions or require additional information, you may contact the Dealer License and Regulation Office at (401) 462-5746.

Any application received after December 31, 2020 will go before the board.

**Complete one application for both Main and Annex
Include a check for \$302.50 for each location.**



RHODE ISLAND DEALERS' LICENSE & REGULATIONS OFFICE
 DIVISION OF MOTOR VEHICLES
 600 NEW LONDON AVENUE, CRANSTON, RI 02920
 TEL# (401) 462-5746 FAX # (401) 462-5789

OFFICIAL USE ONLY:
 RECEIVED: _____
 CHECK # _____
 ISSUED: _____

2021

MOTOR VEHICLE DEALERS' RENEWAL APPLICATION

CUSTOMER PROFILE

DATE: _____

1. Corporate Name: _____

2. d/b/a Name: _____

3. Principal Business Location: Number/Street _____ City/Town _____ State _____ Zip code _____

4. Location of Annex _____ Number/Street _____ City/Town _____ State _____ Zip code _____

5. Telephone Number of Dealership: _____ Fax Number: _____

Cell Phone Number: _____ Home Phone Number: _____

E-mail: _____ Federal Tax ID # _____

6. License Number(s): Main Annex Date of 1st original license. _____

7. Names, titles and addresses of all Corporate Officers, Owners or Partners of Dealership:

Name	Title and date of title	Residential Address

8. a.) Name of company you have contract or franchise with: _____ Effective Date: _____

b.) If yes, what make of vehicles? _____

List Number of Vehicles sold from **January 1, 2020-** to present date for both main and annex:

New Vehicles Retailed: _____

Used Vehicles Wholesaled: _____

Used Vehicles Retailed: _____

Total Number of Vehicles Sold in **2020**: _____

Dealer Plates Assigned (list all): _____

900 Dealer Plates Assigned: _____

I, the undersigned, hereby declare that I am the **owner, officer or member** of the above dealership and that the above information is true to the best of my knowledge or belief.

Signature of applicant: _____ d _____ Printed name: _____

1.. Customer Profile	YES ()	NO ()
2.. Employee List	YES ()	NO ()
3. Employee Authorization Form	YES ()	NO ()
4. Runner List	YES ()	NO ()
5. MVT-10 Authorization	YES ()	NO ()
6. Line of Credit Affidavit	YES ()	NO ()
7. Bond to read exact as file card.	YES ()	NO ()
8. Updated Tax Permit.	YES ()	NO ()
9. Letter of Good Standing	YES ()	NO ()
10. 2 nd Hand License	YES ()	NO ()
11. Check Attached	YES ()	NO ()
Reviewed by _____		

STATE OF RHODE ISLAND COUNTY OF _____
 Subscribed and sworn to before me this _____ day
 of _____ 20____.

 Notary Public
 Date Notary Term Expires: _____



State of Rhode Island
 Division of Motor Vehicles
 Dealers License and Regulations Office
 600 New London Avenue, Cranston, RI 02920
 PHONE: 401-462-5746 FAX: 401-462-5789

**2020
 Employee List**

Corporate Name: _____

d/b/a Name: _____

**List all employees who are presently on your payroll and receive W-2 forms:
 1099 FORMS ARE NOT ACCEPTED IN THE DEALERS' LICENSE & REGULATIONS OFFICE**

Name: _____ Drivers License# _____

Name: _____ Drivers License# _____

Name: _____ Drivers License# _____

Name: _____ Drivers License# _____

Name: _____ Drivers License# _____

Name: _____ Drivers License# _____

Name: _____ Drivers License# _____

Name: _____ Drivers License# _____

Name: _____ Drivers License# _____

TOTAL NUMBER OF EMPLOYEES LISTED: _____

PLEASE SUBMIT A NEW LIST ANY TIME THERE IS AN EMPLOYEE CHANGE.

1099 FORMS ARE NOT ACCEPTED IN THE DEALERS LICENSE AND REGULATIONS OFFICE.

Have you or any of your employees been convicted of a criminal offense within the last 12 months?

Yes ___ No ___

If yes, please explain in detail on additional sheet.

I, the undersigned, hereby declare under the penalty of perjury, that I have examined this statement regarding the number of employees, and to the best of my knowledge this is true and correct. Rhode Island General Laws §31-11-17.

State of Rhode Island
 County: _____

 Signature of Owner, Partner or Corporate Office

 Print Name

Subscribed and sworn to before me this _____ day of _____ 20____

 Notary Public

 Commission Expires



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 Division of Motor Vehicles
 Dealers License and Regulations Office
 600 New London Avenue, Cranston, RI 02920
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DATE: _____

2021

DEALERS' EMPLOYEE AUTHORIZATION

Dealership Licensed Name: _____

Business Address: _____

Authorization Number: _____

The following people, including owner, partner and corporate officer, are properly authorized to pick up Loaner Agreement Forms and other forms as allowed by the Department of Motor Vehicles for the above-named dealership.

Name	Drivers' License Number
1. _____	_____
2. _____	_____
3. _____	_____

It is understood that every dealership is entitled to list a maximum of three (3) employees who are noted on the Employee List receiving a W-2 form. You must contact the Dealers' License & Regulations office if you must make any changes to this list.

NOTE: *This is not an authorization to register vehicles in the Dealers' Room.*

 Signature of Owner, Partner or Corporate Office

 Print Name

State of Rhode Island
 County: _____

Subscribed and sworn to before me this _____ day of _____ 20____



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DEALERS' RUNNER AUTHORIZATION

Dealership Licensed Name: _____

Business Address: _____

RHODE ISLAND DEALER RUNNERS AUTHORIZED TO REGISTER VEHICLES ONLY

Name	Drivers' License Number
1. _____	_____
2. _____	_____
3. _____	_____

Please attach a copy of the following documents to this form:

- *Driver's License
- *Employer's State Certificate (if employer is an insurance agent or insurance company)
- *W-2 or 1099 Form

 Signature of Owner, Partner or Corporate Office

 Print Name

State of Rhode Island
 County: _____

Subscribed and sworn to before me this _____ day of _____ 20_____

 Notary Public

 Commission Expires



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Dealership Name: _____

Address: _____

MVT-10 AUTHORIZATION

Assignments must be completed **IN FULL** when transferring from dealer to dealer or dealer to private party, e.g.; buyer and seller information, mileage, signatures, printed names dates, and dealer license number.

Dealers must complete **ALL** assignments on the title **BEFORE** using the MVT-10 form. Any and all reassignments (MVT-10) that are assigned to a dealership are to be used by that dealership **ONLY**. Dealer is responsible for all MVT-10's assigned to the dealership.

We acknowledge that we have read the instructions for use of an MVT-10. It is understood that the dealership is responsible for the use of the MVT-10's assigned to them.

 SIGNATURE OF OWNER, PARTNER, OR CORPORATE OFFICER

 PRINTED NAME OF OWNER, PARTNER, OR CORPORATE OFFICER

SIGNED AND SWORN BEFORE ME ON THIS _____ DAY OF _____ 20____

 NOTARY SIGNATURE

 NOTARY PRINTED NAME

 COMMISSION DATE



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DEALERS' LINE OF CREDIT AFFIDAVIT

Pursuant to the Rules and Regulations Regarding Dealers, Manufacturers & Rental Licenses,
§ VI (O), the below named dealership maintains a line of credit of at least \$50,000 at the following
financial institution:

Dealership Licensed Name: _____

Business Address: _____

Signature of Owner, Partner or Corporate Officer

Print Name

Name of financial institution)

Address

Phone Number

Authorized Financial Agent:

Print Name

Authorized Financial Agent Signature

Direct Phone Number

State of Rhode Island County _____

Subscribed and sworn to before me this _____ day of _____ 20_____

Notary Public

Commission Expires



State of Rhode Island
 Dealers License and Regulations Office
 600 New London Avenue, Cranston, RI 02920

SURETY BOND NO. _____

Know all men by these presents

That we _____
 of _____
 as principal and _____
 a corporation organized under the laws of the State of _____
 and authorized to do business in the State of Rhode Island and having an office at _____
 _____ in the State of _____ as surety are held and firmly bound unto the Rhode
 Island Dealers License & Regulations office in the State of Rhode Island in the penal sum of _____ dollars
 (\$ _____) lawful money of the United States of America, well and truly to be paid to the said Regulations Office or their
 successors, or assigns, for which payment, well and truly to be made, we bind ourselves, ours heirs, executors, administrators and
 successors jointly and severally, firmly by these presents. Said Regulations Office may assign to purchasers / sellers of motor vehicles
 from the principal any and all rights arising out of this obligation. WHEREAS, The principal has applied or is about to apply to the
 Rhode Island Dealers' License & Regulations Office for a license to conduct the business of a motor vehicle dealer pursuant to the
 provisions of Chapter 1499 Public Laws 1956 as amended, for the year commencing _____, 20
 _____ and ending December 31, 20 _____ at _____ in the State of Rhode Island.

NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, that if the said principal shall faithful comply with the
 provisions of the motor vehicles dealers license law, being Chapter 1499 Public Laws of 1956 as amended or as hereafter amended,
 and shall promptly pay all costs and damages incurred or caused by any violation of the provisions of said Chapter or any regulation
 of the Rhode Island Dealers' License & Regulations Office, then this obligation is to be void, otherwise to remain in full force and
 effect, subject, however, to the following conditions:

1. The aggregate liability of the Surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond.
2. Unless previously cancelled, as hereinafter provided, this bond shall be in effect for the period of said license. Ending December 31st of the above-stated calendar year. The Surety may, however, at any time terminate its obligation hereunder by giving sixty (60) days written notice to said Principal and the Rhode Island Dealers' License & Regulations Office, in which event the liability of the Surety shall, at the expiration of said sixty (60) days, cease and determine, except as to such liability of the Principal for violation of said Chapter or regulation of said Regulations Office occurring prior to the expiration of said sixty (60) days.
3. No action to recover hereunder may be brought after the expiration of two (2) years from the termination of this bond.

Signed, sealed and
 Delivered in the presence of:

Dealership Name: _____

Owners' Signature: _____

 Print name of Insurance Agency

 Surety

by _____

Surety Authorized Signature

Title _____

ACKNOWLEDGEMENT OF PRINCIPAL

(As owner, partner, or corporate officer)

STATE OF RHODE ISLAND

County of _____

On this _____ Day of _____ 20 _____ before me personally appeared the above named _____,
 Representing _____ as to me known and known to me to be the same person described in and who executed
 the above instrument and duly acknowledged the execution of the same.

 Notary Public

Approved _____ 20 _____ Rhode Island Dealers' License & Regulations Office

 Administrator - DMV

IMPORTANT! THIS BOND IS NOT VALID UNLESS PROOF OF ACCEPTANCE (Power of Attorney Authorization) FROM INSURANCE COMPANY IS ATTACHED TO THIS DOCUMENT. SUBMIT ORIGINAL BONDS TO THE DEALERS' LICENSE AND REGULATIONS OFFICE, 600 NEW LONDON AVENUE, CRANSTON, RI 02920